Food and Drug Administration Center for Food Safety and Applied Nutrition Office of Special Nutritionals

ARMS#

13187



7 - PROCEDURES

HEMATOLOGY BLOOD CELL COUNTS

COLLECTION DATE 09/12/98 COLLECTION TIME 1635.	
	NITS REF-THER
BLOOD CELL COUNT	
WBC 13.3 H	0^9/L [3.4-10.7]
KDL 5 40	
ngb 16.3 H	0^12/ [3.70-5.40] 4/DL [11.7-15.8]
HCT 47.8	[33.2-48.0]
MCV 88.5 FI	
RDW 13.2 g.	[11.0-15.0]
PLATELET)^9/L [150-400]
AUTOMATED DIFFERENTIAL PERCENTAGES	
AUTO CRAN & OO O II	540 0 00 00
ATTO TAMPH 9 7 0 T	[40.0-80.0]
AUTO MONO & 21 T	[10.0-44.0]
AIITO FOC& 7	[4.0-15.0]
AUTO BASO% .2	[.0-8.0]

GRAN ABS LYMPH ABS MONO ABS EOS ABS BASO ABS	12.0 H 0.9 0.3 0.1	10^9/L 10^9/L 10^9/L	[1.7-8.5] [0.9-3.6] [0.3-1.0] [0.0-0.6]
	0.0	10^9/L	[0.0-0.3]

CHEMISTRY ELECTROLYTES

COLLECTION DATE COLLECTION TIME	09/13/98 0633		
SODIUM POTASSIUM CHLORIDE CO2 ANION GAP	133 L 3.8 102 21 L 10	UNITS MM/L MM/L MM/L MM/L MM/L MM/L Follow-Up Adverse Report MM/L Thomas S. Donaldson 01-11-99	REF-THEF [136-145 [3.4-5.2 [99-110] [22-32] [4-15]

Thomas S. Donaldson 01-11-9 Exhibit: 3 page 25 of 40

Memo Date: January 11, 1999
Subject: F/U Adverse Report/
To: Dorothy L. Olson, ASCSO
From:Thomas S. Donaldson, CSO
Exhibit No: page of

Footnotes

L = Low, H = High

Adm. Date: 09/12/98

Adm. Doctor:
Discharge Date: 09/15/98

Print Date/Time: 09/17/98 0121

DISCHARGE LAB SUMMARY

AUTOMATED DIFFERENTIAL ABSOLUTE

** CONTINUE TO NEXT PAGE **

Patient Name:
Medical Record
Patient Account
DOB:
Age: 5

Age: 56 YRS Sex: F Loc: Page:

HEM-CBC/DIFF CHEMISTRY ELECT

[.0-3.0]

PATHOLOGISTS:

AT 09/12/98 17:31 BY

CHEMISTRY-BLOOD CHEMISTRY PROFILES

COLLECTION DATE 09/12/98 COLLECTION TIME 1635 \ UNITS REF-THER BILIRUBIN TOTAL MG/DL [.1-1.2]BILI DIRECT . 2 MG/DL [.0-.5]ALBUMIN 4.1 GM/DL [3.5-5.0]ALK PHOS 74 [25-125] U/L ALT 38 U/L [0-40]AST 60 H U/L [10-40]09/12/98 1635 RESULTS CALLED TO

CHEMISTRY - LIPID STUDIES

PROCEDURE UNITS REF-THER 14SEP98 MON 0555

TRIGLYCER MG/DL (10-190)105

> medWatch Report #13187 Follow-Up Adverse Report Thomas S. Donaldson 01-11-99 Exhibit: 3 page 27 of 48

Memo Date: January 11, 1999 Subject: F/W Adverse Report/ To: Dorothy L. Olson, ASCSO csa Asd From: Thomas S. Donaldson

Exhibit No:

page of

Footnotes H = High

Adm. Date: 09/12/98

Adm. Doctor:

Discharge Date: 09/15/98

Print Date/Time: 09/17/98 0121

DISCHARGE LAB SUMMARY

** CONTINUE TO NEXT PAGE **

Patient Name: Medical Record # Patient Account #: DOB

<u>56</u> YRS Age: Loc:

Sex: F Page:

000003

3

BCP-BLD CHEM PR LIPID STUDIES

PATHOLOGISTS:

CHEMISTRY ROUTINE

PROCEDURE GLUCOSE F CALCIUM ALBUMIN UNITS MGS/DL\` MG/DL GM/DL REF-THER (70-110)\\: (8.5-10.5)(3.5-5.0)**197** H 13SEP98 SUN 0630 8.4 L 15SEP98 TUE 0628 145 H 8.6 3.0 L

CHEMISTRY ENZYMES

HEPATIC ENZYMES

PROCEDURE AST UNITS U/L REF-THER (10-40)13SEP98 SUN 0633 21

CRITICAL NOT CALLED. SIMILAR TO PREVIOUS RESULTS.

MISCELLANEOUS ENZYMES

PROCEDURE AMYLASE SERUM UNITS U/L REF-THER (17-115)15SEP98 TUE 0628 **186** H 14SEP98 MON 0555 605 C

> CRITICAL RESULTS WERE CALLED TO DATE&TIME: 09/14/98 08:05 .

13SEP98 SUN 0633 **1101** C 12SEP98 SAT 1635 1296 C

> medWatch Report #13187 Follow-Up Adverse Report Thomas S. Donaldson 01-11-99 Exhibit: 3 page 26 of 40

Memo Date: January 11, 1999 Subject: F/U Adverse Report To: Dorothy t. Olson, ASCSO

BY TECH

From: Thomas S. Donaldson, CSO

Exhibit No:

page

Footnotes

L = Low, H = High, C = Critical

Adm. Date: 09/12/98

Adm. Doctor:

Discharge Date: 09/15/98 Print Date/Time: 09/17/98 0121 ** CONTINUE TO NEXT PAGE **

Patient Name: Medical Record # Patient Account DOB: 56 YRS Age: Loc:

ROUTINE CHEMIST CHEMISTRY ENZYM

ON |

Page: 000004

Sex: F

PATHOLOGISTS:

0628

ACC#

REFERENCE LAB MISC.

DATE/TIME DRAWN 09/15/98

HEMOGLOBIN A1C = 6.1% (H)

(NORMAL = 4-6%)Correlation with HgAlC and Glucose control is as follows: AVERAGE BLOOD GLUCOSE (MG/DL) HGA1C RESULT 6 120 7 155 8 190 9 225

10 260 11 295 330 12 13 365

HEMOGLOBIN A1C

Every sustained decrease in HGA1C of 1 percent results in a 25 percent decrease in the risk of developing diabetic microvascular complications.

> medWatch Report #13187 Follow-Up Adverse Report Thomas S. Donaldson 01-11-99 Exhibit: 3 page 28 of 48

Memo Date: January 11, 1999 Subject: F/U Adverse Report To: Dorothy L. 01son, ASCSO From: Thomas S. Donaldson, CSO

Exhibit No: page

@ = HEMOGLOBIN A1C Performed at

Adm. Date: 09/12/98

Adm. Doctor:

Discharge Date: 09/15/98

Print Date/Time: 09/17/98

DISCHARGE LAB SUMMARY

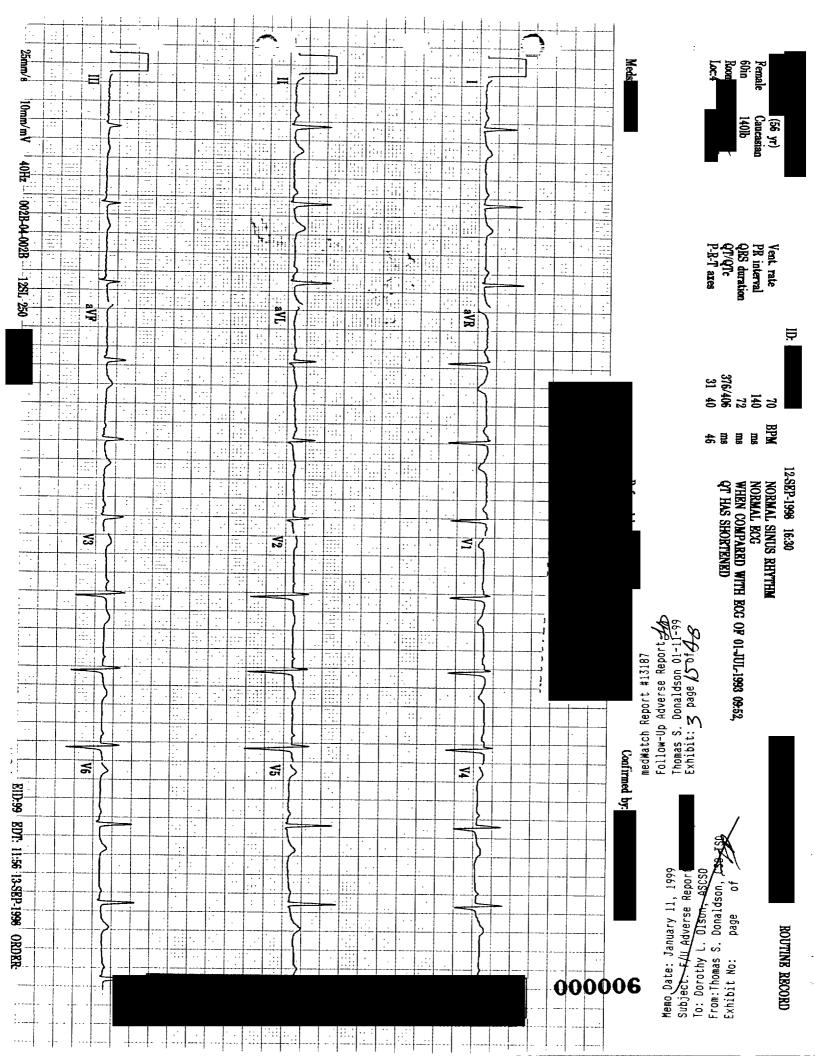
***** END OF CHART *****

Patient Name: Medical Record Patient Account DOB:

Age: 56 YRS Sex: F

Page:

of



ULTRASOUND REPORT

PATIENT:

MED. REC. #:

DOB:

AGE:

56Y

DOCTOR(S):

LOCATION:

ESSENTIAL CLINICAL DATA:

DATE: 9/12/98

SPECIAL INSTRUCTIONS:

RIGHT UPPER QUADRANT ULTRASOUND

Scans of the gallbladder show no gallbladder wall thickening or pericholecystic fluid. There is no cholelithiasis. The common bile duct is normal in caliber. Abdominal aorta is also normal in size. There is no aneurysmal dilatation. The visualized portions of the pancreas show no focal lesion. The pancreas is mildly prominent. The liver is echogenic, consistent with fatty infiltration. There is no free fluid within the abdomen and pelvis. The kidneys are normal.

IMPRESSION

1) Negative for cholelithiasis or ductal dilatation.

2) Probable fatty infiltration within the liver.

3) Pancreas is somewhat full but without focal lesion or surrounding inflammatory change.

Dictated and Authenticated By:
Transcribed By: September 13, 1998

, M.D.

000007

medWatch Report #13187
Follow-Up Adverse Report \$\footnote{y}\$
Thomas S. Donaldson 01-11-99
Exhibit: \$\footnote{y}\$ page \$\footnote{g}\$ f\$\$\footnote{A}\$\$

Medical Records

Memo Date: January 11, 1999 Subject: E/U Adverse Report To: Dorothy L. 81son, ASCSO

From:Thomas S. Donaldson CSO Exhibit No: page of

Memorandum to ARMS # 13187

Date: 1 1 1 1 9 9

From: Medical Officer, Clinical Research and Review Staff, Office of Special

Nutritionals, HFS-452

Subject: Medical Records Place in Permanent Storage.

The following types and amounts of records (more than 20 pages total) were place in permanent storage on this date because they were not considered essential for interpretation of this adverse event.

Approx Pages	Type of Records
15	Nursing notes
	Dietitian notes
	Respiratory therapy/occupational therapy/physical therapy notes
	Clergy notes
	Medication records
8	Physician's orders
8	Vital signs, fluids, input/output records
	Ventilator records
3	Hospital administrative records (e.g., insurance information, living will, etc)
	immagation record

_____ harrows